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(TUE) 12. 20' 05 14:01/ST. 13:55/NO. 4860347587 P 1

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FOUNDED 1890

PATENT, TRADEMARK, COPYRIGHT
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TOTAL PAGES (Including Cover Page) 7 DATE: December 20, 2005

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TO: Examiner T. Mitchell FROM: Raiford A. Blackstone, Reg. No. 25 156

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NOTES:

Inventor: Smith et al.
For: AN EXPIRATORY LIMB FOR A
BREATHING CIRCUIT
Serial No.: 10/622,755
Filed: July 18, 2003
Art Unit: 3743
Atty Docket No.: 1171/39359A/95A-DIV

CERTIFICATION OF FACSIMILE TRANSMISSION

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FROM TREXLER ETAL.

(TUE) 12. 20' 05 14:01/ST. 13:55/NO. 4860347587 P 2

FORM PTO-1083

Case Docket No. 1171/19359A/95A-DIV

In re application of: **Smith et al.**
 Serial No.: **10/622,755**
 Filed: **July 18, 2003**
 For: **AN EXPIRATORY LIMB FOR A BREATHING CIRCUIT**

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Tiffany E. Sedon	

COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an "AMENDMENT" for the above-identified application.

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The filing fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)
	Claims Remaining After Amendment		Highest No. Previously Paid for	Present Extra
TOTAL	* 90	MINUS	** 90	0
INDEP.	* 4	MINUS	** 4	0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

SMALL ENTITY	
Rate	Addit. Fee
x 25 =	\$.00
x 100 =	\$.00
+ 180 =	\$.00
TOTAL ADDIT. FEE	\$.00

OTHER THAN A SMALL ENTITY	
Rate	Addit. Fee
x 50 =	\$.00
x 200 =	\$.00
+ 360 =	\$.00
TOTAL	\$.00

OR

OR

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
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The "Highest Number Previously Paid For" (Total or independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

- ☒ Please charge my Deposit Account No. 20-1495 in the amount of \$ 790.00 for the RCE fee. A duplicate copy of this sheet is enclosed.
- ☒ Request for Continued Examination (RCE).
- ☒ Please charge my Deposit Account No. 20-1495 in the amount of \$ 450.00 for the Extension Request. A duplicate copy of this sheet is enclosed.
- ☒ A Request for a Two-Month Extension of Time.
- ☐ A check in the amount of _____ to cover the filing fee is also enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 20-1495. A duplicate copy of this sheet is enclosed.
- ☒ Any filing fees required under 37 CFR 1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 CFR 1.17.

Dated: Dec. 20, 2005

Raiford A. Blackstone, Jr.
 Raiford A. Blackstone, Jr. Reg. No. 25,156
Linda L. Palomar
 Linda L. Palomar Reg. No. 37,903
 Attorneys of Record

FORM PTO-1083

Case Docket No. 1171/39359A/95A-DIV

In re application of: Smith et al.
 Serial No.: 10/622,755
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OTHER THAN A SMALL ENTITY	
Rate	Addit. Fee
x 50 =	\$.00
x 200 =	\$.00
+ 300 =	\$.00
TOTAL	\$.00

OR

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Dated: Dec. 20, 2005Raiford A. Blackstone, Jr. Reg. No. 25,156Linda L. Falomir Reg. No. 37,903

Attorneys of Record